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FEC FORM 1

STATEMENT OF ORGANIZATION

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NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	into a La companya
BRADLEY ARANT BOULT C	JMMINGS LLP FEDERAL F	OLITICAL ACTION COMM	ITTEE	
			1_1_1_1_1_1_1	
ADDRESS (number and street)	1819 5TH AVENUE NOR	TH		
(Check if address is changed)				
	BIRMINGHAM		AL 352)3
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e-	mail address)		
	CGRISSOM@BABC.COM	<u> </u>	<u> </u>	
X (Check if address is changed)				
COMMITTEE'S WEB PAGE ADI	DRESS (URL)			
(Check if address is changed)				
2. DATE 08 11	2011 C, 009	500017		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief i	t is true, correct and c	omplete.
Type or Print Name of Treasure	Christopher Ray Gr	rissom		
Signature of Treasurer	Proph Ry	<u></u>	Date 08	0 0 0 7 9 7 9 9 9 9 17 17 17 17 17 17 17 17 17 17 17 17 17
NOTE: Submission of false, errone	ous, or incomplete information of the ANY CHANGE IN INFORMATION			enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530	ion 「	EC FORM 1 Revised 02/2009)

	EC FUI	ii i (hevised 02/2009)
TYPE	OF CO	DMMITTEE
Cand	lidate	Committee:
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name Candid		
Candid Party	d ate Affiliatio	Office State Sought: House Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candid		
Party	Com	mittee:
(d)	1	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Politi	cal A	etion Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a
	·	Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint	Fund	raising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	. ÷ . ;	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Comr	nittees Participating in Joint Fundraiser
	1.	FEC ID number
	2.	FEC ID number
	3.	FEC ID number
	4	I I I I I I I I I I I I I I I I I I I

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	Vrite or Type Committee Name		
E	BRADLEY ARANT BOULT C	UMMINGS LLP FEDERAL POLITICAL ACTION COMMITTEE	·
6.	Name of Any Connected C	Organization, Affillated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
L	1 1 1 1 1 1	<u> </u>	
Ŀ			
	Mailing Address		
	•		
		CITY STATE Z	IP CODE
	Relationship: 4 Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
7.	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in posse	ession of committee
	. CURTOTO	DPHER RAY GRISSOM	
	Full Name	1819 5TH AVENUE NORTH	
	Mailing Address	TOTA STILL ROBING MORTH	
		BIRMINGHAM AL 35203	
	Title or Position	CITY STATE ZI	P CODE
	TREASURER	Telephone number	, }-} , ; ,
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name CHRISTO	DPHER RAY GRISSOM	1-1-1-1-1-1-1-
	Mailing Address	, 1819 5TH AVENUE NORTH	1 1 1 1 1 1
			1 1 1 1 1 1
		BIRMINGHAM AL 35203	. 1-1
		CITY STATE ZI	P CODE
	Title or Position TREASURER	Telephone number	

	levised 02/2009)	Page 4
		·
Full Name of Designated CHF Agent	RISTOPHER RAY GRISSOM	
Mailing Address	1819 5TH AVENUE NORTH	
	BIRMINGHAM AL	35203
	CITY STATE	ZIP CODE
Title or Position TREASURER	Telephone number	<u> </u>
safety deposit boxes or		unds, holds accounts, rents
Name of Bank, Deposit	itory, etc.	•
• •	•	
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Mailing Address		
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<u>Ļ</u>	CITY	ZIP CODE
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L_L_Mailing Address	_ 	ZIP CODE
Mailing Address Name of Bank, Deposi	_ 	ZIP CODE
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(3/2005)

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